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PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875										Application of Doctor Number		
CLAIMS AS FILED – PART I (Column 1) (Column 2)								SMALL I	ENTITY	OR		R THAN ENTITY
FOR			NUMBER FILED		NUMB	NUMBER EXTRA		RATE	FEE]	RATE	FEE
BASIC FEE (37 CFR 1.16(a))							1		\$	OR	10112	s
TOTAL CLAIMS (37 CFR 1,16(c))			minus 20 =				1	x s =		OR	x \$ =	
INDEPENDENT CLAIMS (37 CFR 1.16(b))				minus 3 = *				x \$ =		OR	x \$ =	
MUL	TIPLE DEPEN	DENT C	LAIM PRESEN	IT (37 CFR 1.16(d))	,	1	+s =		OR	+ s =	
* If the difference in column 1 is less than zero, enter "0" in column 2.							J	TOTAL		OR	TOTAL	
CLAMS AS AMENDED - PART II												<u> </u>
	Ø1 Ø	4/	D (1)		(Column 2)			SMALL ENTITY		OR	OTHER THAN SMALL ENTITY	
AMENDMENT A	,	Ri	CLAIMS EMAINING AFTER IENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE	·	RATE	ADDI- TIONAL FEE
	Total (37 CFR 1.16(c))	<u> </u>	22	Minus	"da	- Ø		x \$=		OR	x \$50	Q
	Independent (37 CFR 1.16(b))		3	Minus	3	- Ø		x \$=		OR	x 200	Ø
A	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))							+ \$=		OR	+\$ =	
								TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	0
		(C	olumn 1)		(Column 2)	(Column 3)					·	
AMENDMENT B		RE AM	CLAIMS EMAINING AFTER ENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE	·	RATE	ADDI- TIONAL FEE
	Total (37 CFR 1.16(c))	<u> </u>		Minus	**	=	Ì	x \$=	_	OR	x \$=	
	Independent (37 CFR 1.16(b))	Ŀ		Minus	***	=		x \$=		OR	x \$=	
¥	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))							+ \$=		OR	+ \$=	
								TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	
		_	olumn 1)		(Column 2)	(Column 3)					· .	
AMENDMENT C		RE AM	CLAIMS MAINING AFTER ENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total (37 CFR 1.16(c))	<u> </u>		Minus	**	=		x \$=		OR	· X \$ =	
	Independent (37 CFR 1.18(b))	<u> </u>		Minus	***	=		x \$=		OR	x s=	
A	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))							+ \$=		OR	+ \$=	
· · · · · · · · · · · · · · · · · · ·								TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	
•	* If the "Highes ' If the "Highes	t Numb	er Previously er Previously	Paid For	in column 2, write IN THIS SPACE IN THIS SPACE in Total or Independe	is less than 20, s less than 3, ei	ente	*3*	the appropriat	e box in co	olumn 1.	

The 'Highest Number Previously Paid For' (Total or Independent) is the highest number found in the appropriate box in column 1.

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.